

OUT-OF-STATE TRAVEL APPROVAL REQUEST


*Pursuant to the Provisions of Sections 1062,
11032, and 11033 of the Government Code and
SAM Section 0730, et seq.*

Send 6 copies to: Director, Department of Finance


STD. 257 (REV. 5-94) *PMC*

NAME AND TITLE		DOCUMENT NUMBER	
		DATE	
DIVISION	DEPARTMENT		AGENCY
PURPOSE		ABSENCE DATES	
ITINERARY		ACTION REQUIRED: For approval by Director (within blanket STD. 260-- retain STD. 257 within Department). <input type="checkbox"/> For approval of Agency Secretary (if appropriate), Department of Finance, and Governor. Specific advance approval required <input type="checkbox"/> Additional funds required (BR # _____) <input type="checkbox"/>	
TRANSPORTATION TYPE	EXPENSES NOT TO EXCEED		
FUND			
REQUESTED BY		TITLE	

FUNDING

Allotment: _____ Unencumbered remainder after posting this estimate to allotment expenditure ledger Adjustment increasing encumbrances Adjustment decreasing encumbrances	<i>I HEREBY CERTIFY upon my own personal knowledge that the unencumbered balance in the budget allotment for travel out-of-state shown above is correct per the Allotment- Expenditure Ledger.</i> (After BR No. _____) ACCOUNTING OFFICER'S SIGNATURE 
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DEPARTMENTAL APPROVAL

APPROVED BY 	DATE
TITLE	

AGENCY APPROVAL

APPROVED BY 	DATE
TITLE	

AUTHORIZATION

APPROVED, DIRECTOR OF FINANCE 	DATE	APPROVED, GOVERNOR OF CALIFORNIA 	DATE
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